

## **D. Evaluation Process and Criteria**

A panel of experts will conduct a review of responsive proposals. This technical review panel will convene in the months following the due date for submission of proposals. The panelists' recommendations will contain numerical ratings based on the evaluation criteria, the ranking of all responsive proposals, and a written assessment of each applicant. In addition, we will conduct a financial analysis of the recommended proposals and evaluate the proposed projects to ensure that aggregate Medicare program expenditures are reduced.

### **1. Evaluation Criteria and Weights**

#### **a. Statement of the Problem (5 points)**

The proposal describes:

- the population
- patterns of health care
- incidence of disease in the geographic area to be served by the disease management program
- enhancements planned in the disease management program
- obstacles to providing disease management services

#### **b. Targeting the Appropriate Population (15 points)**

- The proposal provides details on how the applicant plans to identify, recruit, and enroll eligible Medicare beneficiaries into the demonstration.
- The strategy and plan for recruiting the required number of patients in the control and experimental groups appear reasonable and achievable.
- The applicant describes the process by which they will ensure that enrollment is voluntary and the beneficiary is fully informed of all aspects of the demonstration. A draft consent form is included in proposal and is sufficient. The form should include, but not be limited to, information about the randomization process, and use of the patient's medical records (e.g., for monitoring quality of care and for evaluating the demonstration project).
- Applicant explicitly states how its referral sources will use common or readily available information, tests, or instruments to properly identify appropriate candidates before enrollment in order to reduce the incidence of post-enrollment beneficiary rejection due to ineligibility.
- The applicant provides sufficient information on how many beneficiaries it expects to treat each year at each site, and its total over the three-year period is 5,000 or more.
- In determining the clinical targeting criteria, the applicant agrees to use the Suggested Disease Identification Guidelines outlined in this notice, or if not, it details the disease identification guidelines it proposes using and explains why alternative guidelines are preferred.
- The applicant provides information on how it will target and serve the Medicare ethnic patient populations disproportionately affected by the three advanced-stage, chronic conditions named in BIPA Section 121 (CHF, diabetes, and coronary heart disease).

- The applicant clearly and sufficiently describes the randomization process it proposes for this demonstration project.

c. Description of Disease Management Intervention Services (20 points)

- The proposal provides clear and convincing evidence and supporting materials that proposed disease management services are appropriate for the targeted population, likely to improve the quality of care for these individuals, and likely to result in savings from efficiencies in the use of medical services/products.
- There are adequate mechanisms for ensuring the medical necessity and reasonableness of the disease management services furnished under the demonstration.
- There are adequate mechanisms for ensuring that beneficiaries' physicians are integrated with the project.
- The proposal provides sufficient detail on exactly how each service will be provided, the type and level of staff that will be providing the service, the proposed level of effort required, and a discussion of any special equipment, such as monitoring or electronic input devices.
- The proposal provides sufficient information on the provision of prescription drugs and protocols to be followed as well as the pharmacy distribution network to be used during the demonstration.
- The data to be collected, data sources, and data analyses planned are specified in detail and are sufficient to ensure optimal medical management and efficient use of health care services.

d. Organizational Capabilities (15 points)

- The proposal provides evidence of the availability and adequacy of the following components which are necessary to ensure adequate service delivery and the provision of high quality of care:
  - facilities
  - equipment
  - trained staff
  - clinical protocols to guide care delivery and management
  - linkages to providers and services necessary to deliver care
  - appropriate information systems
  - appropriate financial systems
- The proposal includes a detailed implementation plan describing tasks, time lines, and costs associated with implementing the demonstration program.
- If any modifications to the applicant's current structure are proposed, they have been sufficiently described and justified. Modifications may involve protocols, services, outreach, education initiatives, timelines, etc.
- The organizational and reporting structure of personnel are provided.
- The applicant describes how it will modify its existing data and claims systems in order to submit electronic claims and prescription drug information for payment to the appropriate Medicare contractor(s), using standard claims formats, and to meet all data requirements for the project.

- The application provides a detailed plan of all tasks necessary to implement the disease management project, a schedule with time lines for all essential tasks, a listing of key personnel for the project, including an overall point of contact for the demonstration, and a break out of the responsibilities for persons working on the project.
- The applicant expresses willingness to cooperate in an independent formal evaluation of the demonstration, including submission of cost and other program data and site visits, conducted by CMS and/or its contractor.
- The proposal does not include targeting or treatment protocols that are proprietary in nature, or, if proprietary protocols are included, the proposal clearly indicates the applicant's agreement to the following statement:

*"At any phase in the project, including at the project's conclusion, the awardee if so requested by the project officer, must deliver to CMS materials, systems, or other items applied, developed, refined or enhanced in the course of or under the award to be used to further the purpose of this demonstration project. These materials, systems, or other items shall not be subject to use for any other purpose."*

e. Effectiveness of Intervention(s): Quality (25 Points)

- The proposal describes how its program will improve health status.
- For existing disease management programs, the applicant demonstrates prior experience in operating successful disease management programs.
- For existing disease management programs, the applicant shows evidence of positive outcomes from prior and current efforts. Claims of prior success must include definitions of the outcomes measures used, as well as explanations of the length of time over which they were measured and how the measures were calculated. Results from similar projects are cited.
- The applicant describes how its proposed intervention(s) is likely to have a positive effect, qualifying and quantifying its results through common or readily available tests, or explaining why and how alternate tests need to be conducted to show improvement.
- The applicant expresses a willingness to work with CMS, the evaluation contractor, and the consortium of awardee sites to determine the specific data to be collected across sites for each disease category, as well as to develop consistent measurement strategies between sites.
- The proposal provides convincing evidence that the intervention will likely increase the appropriate utilization of evidence-based and guideline-recommended therapies, as well as improve patient outcomes.
- Existing information systems and/or proposed new data collection are adequate to meet the quality of care reporting requirements. Applicants should list data to be collected in demonstration.
- The proposal reports strong, credible likelihood of savings and improved patient outcomes calculated from data collected during implementation of similar disease management interventions by the applicant.

f. Payment for Disease Management Services, Reduction of Medicare Expenditures, and Reinsurance (20 Points)

- The proposal provides justification and explanation for the proposed payment amount(s).
- The proposed payment amount for the bundle of disease management services is reasonable considering the scope and nature of services included.
- The proposal provides clear, convincing evidence that, over the three years of the demonstration, the aggregate Medicare expenditures under Parts A and B (including incentives and start-up funding, if made) will be less than expected Medicare expenditures in the absence of the demonstration.
- The proposal provides strong evidence supporting the applicants' accuracy in its estimates of the expected net Medicare savings and the expected total yearly Medicare expenditures for the treatment and control groups.
- The applicant provides convincing evidence that it can guarantee its estimated net reduction in aggregate Medicare spending through reinsurance or some other means.
- The applicant provides clear and convincing descriptions of the system that will be established to compensate Medicare in the event actual payments (including all DM payment costs and prescription drugs) exceed the applicant's estimate.

## 2. Final Selection

Our Administrator will make the final selection of projects for the demonstration from among the most highly qualified applicants, taking into consideration a number of factors, including operational feasibility, geographic location, and program priorities (for example, testing a variety of approaches for delivering services, targeting beneficiaries, and payment). Applicants should be aware that proposals may be accepted in whole or in part. In evaluating applications, we rely on our past experience with successful and unsuccessful demonstrations. We reserve the right to conduct one or more site visits before making awards. We expect to make the awards in 2002.